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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Mary First name L Middle name Salazar	First name Middle name
	meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4600	

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Case number (if known)

Debtor 1 Mary L Salazar

		About Debtor 1:	,	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s)		☐ I have not used any business name or EINs. Business name(s)	
		EINs	I	EINs	
5.	Where you live	8518 S. Exchange Ave.	1	If Debtor 2 lives at a different address:	
		Chicago, IL 60617 Number, Street, City, State & ZIP Code	1	Number, Street, City, State & ZIP Code	
		Cook			
		County		County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	i	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	1	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	1	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	

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Document Case number (if known) Debtor 1 Mary L Salazar

Par	Tell the Court About	Your Ba	ankruptcy Ca	ise			
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7					
	choosing to file under						
		□ Ch	napter 11				
		☐ Ch	napter 12				
		☐ Ch	napter 13				
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is sub	pically, if you are paying the fee yo	with the clerk's office in your local court for more detail urself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check wit	y
					tallments. If you choose this options (Official Form 103A).	n, sign and attach the Application for Individuals to Pay	
						only if you are filing for Chapter 7. By law, a judge may	
			applies to you	ur family size ar	nd you are unable to pay the fee in	ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill ou	
			the Application	on to Have the (Chapter 7 Filing Fee Waived (Offic	ial Form 103B) and file it with your petition.	
9.	Have you filed for bankruptcy within the	■ No	ı.				
	last 8 years?	☐ Ye	S.				
			District		When	Case number	_
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is	_					
	not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	S.				
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No	No. Go to line 12.				
	residence:	☐ Ye	s. Has yo	ur landlord obta	ained an eviction judgment against	you and do you want to stay in your residence?	
				No. Go to line	12.		
				Yes. Fill out Inbankruptcy pe		Judgment Against You (Form 101A) and file it with this	

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Desc Main Document Page 4 of 63 Case number (if known) Debtor 1 Mary L Salazar Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No

property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

_	INO.	

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Mary L Salazar Document Page 5 of 63 Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 63 Case number (if known) Debtor 1 Mary L Salazar Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. State the type of debts you owe that are not consumer debts or business debts 16c. 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you **\$0 - \$50,000** □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion **\$50,001 - \$100,000** be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Mary L Salazar Signature of Debtor 2 Mary L Salazar Signature of Debtor 1

Executed on

MM / DD / YYYY

Executed on August 12, 2016

MM / DD / YYYY

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Debtor 1 Mary L Salazar Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jason Blust, Law Office of Jason Blust	Date	August 12, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
Jason Blust, Law Office of Jason Blust		
Printed name		
Law Office of Jason Blust		
211 W Wacker Drive		
Ste. 300		
Chicago, IL 60606		
Number, Street, City, State & ZIP Code		
Contact phone (312) 273-5001	Email address	
#6276382		
Bar number & State		

		1200:11111	<u>-111 Paue 8 01 03</u>	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Mary L Salazar			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				☐ Check if this is
, 				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	50,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,550.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	52,550.00
Ра	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	91,803.89
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	32,948.78
	Your total liabilities	\$	124,752.67
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,522.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,588.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other so	hedules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Mary L Salazar

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

\$ 0.00

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this in	formation to identify yo	our case and th					
Debtor 1	Mary L Salazar						
Dalata a O	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle	Name	Last Name			
United States	s Bankruptcy Court for the	e: NORTHER	N DISTRICT OF ILLIN	NOIS			
Case numbe	r			-			Check if this is an amended filing
Sched n each catego nink it fits bes nformation. If	st. Be as complete and acc more space is needed, atta	cribe items. List a	e. If two married people	n asset fits in more than one e are filing together, both are e e top of any additional pages,	equally responsible	e for supplyi	ng correct
Do you own	ribe Each Residence, Build						
	S. Exchange Ave dress, if available, or other descrip	tion	What is the property Single-family h Duplex or mult Condominium	nome	Do not deduct sec the amount of any Creditors Who Ha	secured clair	ns on Schedule D:
Chicag		60617-0000	Land	or mobile home	Current value of tentire property?	por	rent value of the tion you own?
City State		ZIP Code	☐ Investment property ☐ Timeshare ☐ Other ☐ Who has an interest in the property? Check of the property?		Describe the natu	\$50,000.00 \$50,000. escribe the nature of your ownership interes such as fee simple, tenancy by the entireties, life estate), if known. ee Simple	
Cook			Debtor 2 only				
County				the debtors and another bu wish to add about this item	Check if this (see instructions a, such as local		ty property
			Debtor intends to	o surrender			
			Value according	to www.zillow.com			
	dollar value of the porti			rom Part 1, including any	entries for		\$50,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

pages you have attached for Part 1. Write that number here......>>

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Dal	ator 1			33 Doc 1	Filed 08/12/16 Document	Entered 08/12/ Page 11 of 63 _{Ca}	/16 12:21:37	Desc Main
	_		L Salazar			Ca	se number (ir known) _	
3. C	ars, van	s, tru	cks, tractors, s	port utility vehi	cles, motorcycles			
] No							
	Yes							
3.	1 Make:	C	hrysler		Who has an interest in the	e property? Check one		ed claims or exemptions. Put ecured claims on <i>Schedule D</i> :
	Model	: <u>T</u>	own and Cour	ntry	Debtor 1 only			Claims Secured by Property.
	Year:		002		Debtor 2 only		Current value of the	e Current value of the
			mileage:		Debtor 1 and Debtor 2 o		entire property?	portion you own?
	Other		ation: on title with soi		☐ At least one of the debto	ors and another		
	Debit	JI IS C	on title with soi		Check if this is commu	unity property	\$2,500.0	\$1,250.00
	pages yo	ou hav	e attached for		for all of your entries fr at number here			\$1,250.00
Do	you owr	or h	ave any legal o	r equitable inte	rest in any of the follow	ing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
	Examples	s: Maj	ods and furnish or appliances, fu	urniture, linens, d	china, kitchenware			
-	□ No							
	Yes. [Descri	be					
			Miso	cellaneous use	ed household goods an	d furnishings		\$1,000.00
ı	Electronic Examples ■ No □ Yes. [s: Tele incl	uding cell phone		o, stereo, and digital equip dia players, games	oment; computers, printer	rs, scanners; music col	ections; electronic devices
ı	Collectibl Examples ■ No □ Yes. D	s: Anti othe	ques and figurin er collections, m	ies; paintings, pi emorabilia, colle		oks, pictures, or other art	objects; stamp, coin, o	r baseball card collections;
9. E	quipme	nt for s: Spo	sports and hol	c, exercise, and	other hobby equipment;	picycles, pool tables, golf	í clubs, skis; canoes an	d kayaks; carpentry tools;
_	⊒ Yes. □	Descri	be					
ı	Firearms Example No Yes. [es: Pis		guns, ammunitic	on, and related equipment			

De	ebtor 1	Case 16-25933 Mary L Salazar	Doc 1	Filed 08/12/16 Document	Entered 08/12/16 12:21:37 Page 12 of 63 Case number (if known)	Desc Main
	Clothes Examp □ No	s soles: Everyday clothes, furs,		-		
		Persona	al used cloth	ning		\$250.00
12.	□ No	Describe		engagement rings, wed	ding rings, heirloom jewelry, watches, gems, g	
		Costum	e Jewelry			\$50.00
	Examp ■ No □ Yes. Any oth ■ No	rm animals bles: Dogs, cats, birds, horse Describe ner personal and househo Give specific information	old items yo	u did not already list, iı	ncluding any health aids you did not list	
15		he dollar value of all of your state of all of your state of the state			ny entries for pages you have attached	\$1,300.00
		scribe Your Financial Assets n or have any legal or equ	uitable inter	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No	oles: Money you have in you	•	·	osit box, and on hand when you file your petiti	ion
17.	Examp			al accounts; certificates counts with the same ins	of deposit; shares in credit unions, brokerage titution, list each.	houses, and other similar
	■ No □ Yes			Institution r	name:	
	Examp ■ No	mutual funds, or publicly les: Bond funds, investmen		ith brokerage firms, mor	ney market accounts	
		ıblicly traded stock and in	iterests in ir	ncorporated and uninco	orporated businesses, including an interes	st in an LLC, partnership, and
		Give specific information al	bout them e of entity:		% of ownership:	
20.	Negotia		rsonal check	s, cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.	
	_	Give specific information ab				
		Issue	er name:			

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Case number (if known) Document Debtor 1 Mary L Salazar 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No

Official Form 106A/B Schedule A/B: Property

Beneficiary:

Yes. Name the insurance company of each policy and list its value. Company name:

page 4

Surrender or refund

value:

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Case number (if known) Document Debtor 1 Mary L Salazar Whole Life Insurance, no cash surrender \$0.00 value 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$0.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

■ No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Case number (if known) Document

Debtor 1 Mary L Salazar

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$50,000.00
56.	Part 2: Total vehicles, line 5	\$1,250.00		
57.	Part 3: Total personal and household items, line 15	\$1,300.00		
58.	Part 4: Total financial assets, line 36	\$0.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+ \$0.00		
62.	Total personal property. Add lines 56 through 61	\$2,550.00	Copy personal property total	\$2,550.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$52,550.00

Official Form 106A/B Schedule A/B: Property page 6

	Cas	e 16-25933	Doc 1	Filed 08/12/1		Entered 08/12/16 12:21	:37	Desc Main
Fil	l in this informa	tion to identify you	r case:	120000000000000000000000000000000000000				
De	ebtor 1	Mary L Salazar	Mi	ddle Name	L	ast Name		
1 -	ebtor 2 ouse if, filing)	First Name	Mi	ddle Name	L	ast Name		
Un	ited States Bank	ruptcy Court for the:	NORTI	HERN DISTRICT OF I	LLIN	OIS		
	ise number							☐ Check if this is an amended filing
<u>O</u> 1	fficial Forr	m 106C						
S	chedule	C: The Pi	oper	ty You Cla	im	as Exempt		4/16
the nee	property you list	ed on <i>Schedule A/B.</i> attach to this page a	Property (Official Form 106A/B)	as yo	ther, both are equally responsible for our source, list the property that you a age as necessary. On the top of any	claim as	exempt. If more space is
any fun exe to t	ecific dollar amo applicable stat ds—may be unl emption to a par he applicable s	ount as exempt. Alto utory limit. Some e imited in dollar am	ernatively, exemptions ount. How nt and the	you may claim the forms—such as those for ever, if you claim an value of the propert	ull fai healt exen	ount of the exemption you claim. Our claim.	ng exer enefits, e under	npted up to the amount of and tax-exempt retirement a law that limits the
1.	Which set of e	xemptions are you	claiming?	Check one only, ever	n if yo	our spouse is filing with you.		
	You are clair	ming state and feder	al nonbank	ruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)		
	☐ You are clair	ming federal exempt	ions. 11 U	.S.C. § 522(b)(2)				
2.	For any prope	rty you list on <i>Sch</i> e	edule A/B t	hat you claim as exe	mpt,	fill in the information below.		
		of the property and I at lists this property	ine on	Current value of the portion you own	Amount of the exemption you claim			c laws that allow exemption
				Copy the value from Schedule A/B	Check only one box for each exemption.			
	2002 Chrysler Debtor is on t	Town and Count	ry	\$1,250.00		\$1,250.00	735 IL	_CS 5/12-1001(c)
	Line from Sche					100% of fair market value, up to any applicable statutory limit		
		s used household	goods	\$1,000.00		\$1,000.00	735 IL	CS 5/12-1001(b)
	and furnishings Line from Schedul					100% of fair market value, up to any applicable statutory limit		
	Personal used	•	_	\$250.00		\$250.00	735 IL	_CS 5/12-1001(a)
	Late Home Gone	GG. 5 / V D. 11.1				100% of fair market value, up to any applicable statutory limit		

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustmen	t on 4/01/19 and every 3	years after that for cases filed	on or after the date of adjustment.)

\$50.00

■ No

Official Form 106C

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Costume Jewelry

Line from Schedule A/B: 12.1

☐ Yes

735 ILCS 5/12-1001(b)

\$50.00

100% of fair market value, up to any applicable statutory limit

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Debtor 1 Mary L Salazar

		Document	Page 18	3 of 63		
Fill in this information	n to identify you	r case:				
Debtor 1 Ma	ary L Salazar					
	st Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Firs	st Name	Middle Name	Last Name			
United States Bankrupt	tcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Case number					☐ Check	if this is an
(_	led filing
						9
Official Form 10	6D					
Schedule D: 0	 Creditors	Who Have Claims	Secure	d by Propert	v	12/15
Concadio Di	<u>or ourtor o</u>	Title Have Glaine			,	,.0
		f two married people are filing togeth out, number the entries, and attach it				
number (if known).	nonai i age, ini it e	at, number the entires, and attach it		in the top of any addition	iai pages, write your na	ne and case
1. Do any creditors have	claims secured by	your property?				
☐ No. Check this b	oox and submit th	nis form to the court with your other	schedules. Y	ou have nothing else to	o report on this form.	
Yes. Fill in all of	the information b	pelow.				
		,				
	ured Claims			Column A	Column B	Column C
		nore than one secured claim, list the cre a particular claim, list the other creditors		Amount of claim	Value of collateral	Unsecured
		cal order according to the creditor's name		Do not deduct the	that supports this	portion
2.1 City of Chicago		Describe the property that secures t	the claim:	value of collateral. \$4,085.89	claim \$50,000.00	If any \$4,085.89
Creditor's Name		8523 S. Exchange Ave Chicag		Ψ+,000.03	Ψ30,000.00	Ψ+,000.03
		60617 Cook County	JO, 1L			
		,				
		Debtor intends to surrender				
		\/_ =				
Department of I	inance	Value according to www.zillow As of the date you file, the claim is:	/.COM			
POB 6330	200	apply.	Officer all triat			
Chicago, IL 606		Contingent				
Number, Street, City, S	tate & Zip Code	Unliquidated				
Who owes the debt? C	heck one	☐ Disputed Nature of lien. Check all that apply.				
_	neok one.	☐ An agreement you made (such as r	mortagae or se	cured		
■ Debtor 1 only □ Debtor 2 only		car loan)	mortgage or set	cureu		
Debtor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the deb		☐ Judgment lien from a lawsuit	sname s nem			
☐ Check if this claim re	lates to a	Other (including a right to offset)	Water Lien			
community debt		caror (mordaling a right to officer)				
Date debt was incurred		Last 4 digits of account numl	ber			
2.2 Cook County Ti	reasurer	Describe the property that secures t	the claim:	\$4,000.00	\$50,000.00	\$4,000.00
Creditor's Name		8523 S. Exchange Ave Chicag				<u> </u>
		60617 Cook County				
		Debtor intends to surrender				
		Value according to www.zillow	v com			
DOD 005 400		As of the date you file, the claim is:	Check all that			
POB 805436 Chicago, IL 606	880	apply.				
	-	Contingent				
Number, Street, City, S	rate & ZIP Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? C	heck one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as r	mortgage or se	cured		
Debtor 2 only		car loan)				

☐ Statutory lien (such as tax lien, mechanic's lien)

Debtor 1 and Debtor 2 only

Official Form 106D

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First Name Middle Name Last Name At least one of the debtors and another Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number 2.3 Ditech Financial LIC Describe the property that secures the claim: \$83,718.00 \$50,000.00 \$33.7	 ′18.00
Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number	18.00
	18.00
2.2 Ditach Financial I a Passriba the property that secures the claim: \$62.749.00 \$50.000.00 \$22.7	18.00
Creditor's Name 8523 S. Exchange Ave Chicago, IL 60617 Cook County Debtor intends to surrender	
Value according to www.zillow.com As of the date you file, the claim is: Check all that apply. Saint Paul, MN 55102 Number, Street, City, State & Zip Code Value according to www.zillow.com As of the date you file, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	
Who owes the debt? Check one. Nature of lien. Check all that apply.	
□ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ An agreement you made (such as mortgage or secured car loan)	
☐ Debtor 1 and Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien)	
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit	
Check if this claim relates to a community debt Other (including a right to offset)	
Opened	
Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$91,803.89 \$91,803.89	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 20 of 63	_
Fill in th	nis information to identify you	ır case:		
Debtor 1	Mary L Salazar			\neg
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if,		Middle Name	Last Name	
	-			
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT OF	ILLINOIS	
Case nu (if known)	mber			☐ Check if this is an amended filing
	al Form 106E/F dule E/F: Creditors \	Who Have Unsecure	d Claims	12/15
any execu Schedule Schedule left. Attac	tory contracts or unexpired lease G: Executory Contracts and Une D: Creditors Who Have Claims S	es that could result in a claim. Also xpired Leases (Official Form 106G) ecured by Property. If more space in age. If you have no information to	o list executory contracts on Schedule A/). Do not include any creditors with partial	ly secured claims that are listed in ut, number the entries in the boxes on the
	ny creditors have priority unsecu			
_	o. Go to Part 2.	nou ciamic agamer you.		
Part 2:	 -	RITY Unsecured Claims		
3. Do a	ny creditors have nonpriority uns	secured claims against you?		
_		s part. Submit this form to the court wi	ith your other schedules.	
Y	es.			
unse	cured claim, list the creditor separatione creditor holds a particular claim	tely for each claim. For each claim list	the creditor who holds each claim. If a creted, identify what type of claim it is. Do not list but have more than three nonpriority unsecure	t claims already included in Part 1. If more
				Total claim
	Access Community Health I Nonpriority Creditor's Name	Network Last 4 digits of a	ccount number	\$25.00
	Dept 9090 PO Box 87618	When was the de	ebt incurred?	
	Chicago, IL 60680			
	Number Street City State ZIp Code Who incurred the debt? Check on	•	ou file, the claim is: Check all that apply	
	■ Debtor 1 only			
	Debtor 2 only	☐ Contingent ☐ Unliquidated		
	_	☐ Unilquidated ☐ Disputed		
	☐ Debtor 1 and Debtor 2 only☐ ☐ At least one of the debtors and a	_ '	ORITY unsecured claim:	
	☐ Check if this claim is for a co	По		
	debt	☐ Obligations ari	ising out of a separation agreement or divorc	e that you did not
	Is the claim subject to offset?	report as priority o	claims	
	No	·	ion or profit-sharing plans, and other similar	debts
	☐ Yes	Other. Specify	collection	

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Mary L Salazar		Case number (if know)	
ARM	Last 4 digits of account number		\$706.82
POB 129	When was the debt incurred?		
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	<u></u> '	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify collection		
Capital One	Last 4 digits of account number	6399	\$0.00
Nonpriority Creditor's Name	_		
Attn: Bankruptcy			
	When was the debt incurred?	11/14/06	
	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim	is. Officer all trial apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Student loans		
debt	☐ Obligations arising out of a sep	aration agreement or divorce that you did not	
-	report as priority claims		
■ No			
Yes	■ Other. Specify Credit Card		
CBCS	Last 4 digits of account number		\$359.85
' '	When we the debt in some do		
	when was the debt incurred?		
	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	, , ,,	onesit all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only			
	_ `		
	•		
_	Student loans		
debt	Obligations arising out of a sep-		
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-shari		
☐ Yes	Other. Specify collection		
	ARM Nonpriority Creditor's Name POB 129 Thorofare, NJ 08086 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Capital One Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes CBCS Nonpriority Creditor's Name POB 163250 Columbus, OH 43216 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	ARM Nonpriority Creditor's Name POB 129 Thorofare, NJ 08086 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 0285 Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Contingent □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt Is the claim subject to offset? □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 6 only □ Debtor 9 only □ Debtor 1 o	ARM Nononoirly Creditor's Name POB 123 Thorofare, NJ 08086 Number Street City State 27b Code Who incurred the debt'? Check one. Debtor 1 and Debtor 2 only Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check if this claim is for a community debt Check

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Debt	or r Mary L Salazar	Case number (if know)		
4.5	CCI/Contract Callers Inc Nonpriority Creditor's Name	Last 4 digits of account number 0322	\$411.00	
	Po Box 3000	When was the debt incurred?		
	Augusta, GA 30903 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify 10 Peoples Gas Light And Coke		
4.6	Chicago Imaging, LTD	Last 4 digits of account number	\$167.00	
	Nonpriority Creditor's Name POB 3183	When was the debt incurred?	·	
	Carol Stream, IL 60132 Number Street City State Zlp Code	As of the date was file the plains in Ol. 1. IIII.		
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply		
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	■ Other. Specify collection		
4.7	Commonwealth Financial Systems	Last 4 digits of account number 53N1	\$846.00	
	Nonpriority Creditor's Name			
	245 Main St Dickson City, PA 18519	When was the debt incurred? Opened 01/16		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another			
	☐ Check if this claim is for a community			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	□ Yes	Collection Attorney Crandon Emergency Other. Specify Physicians		

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Debt	or r Mary L Salazar	Case number (if know)	
4.8	Convergent	Last 4 digits of account number	\$330.31
	Nonpriority Creditor's Name POB 1022	When was the debt incurred?	
	Wixom, MI 48393 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection	
4.9	Cook County Health & Hospital	Last 4 digits of account number	\$211.00
	Nonpriority Creditor's Name 25706 Network Place	When was the debt incurred?	
	Chicago, IL 60673 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify medical	
4.1 0	Enhanced Recovery Company	Last 4 digits of account number	\$706.82
	Nonpriority Creditor's Name 8014 Bayberry Rd	When was the debt incurred?	
	Jacksonville, FL 32256 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify collection	

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tor 1 Mary L Salazar		Case number (if know)	
Financial Recovery Services, Inc	Last 4 digits of account number		\$650.27
Nonpriority Creditor's Name POB 385908	When was the debt incurred?		·
Minneapolis, MN 55438 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	Пол		
•	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	Student loans	u ciaini.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	_	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
□ Yes	■ Other. Specify collection		
Liebe Berkilles No		0020	\$0.00
Hsbc Bank Usa, Na Nonpriority Creditor's Name	Last 4 digits of account number	9920	\$0.00
Po Box 2013	When was the debt incurred?	Opened 5/17/01 Last Active 2/22/10	
Buffalo, NY 14240 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the olam	is. Oncor an una appry	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	□ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify Credit Card		
Hsbc Bank Usa, Na	Last 4 digits of account number	0397	\$0.00
Nonpriority Creditor's Name			· · · · · · · · · · · · · · · · · · ·
Po Box 2013 Buffalo, NY 14240	When was the debt incurred?	Opened 4/22/01 Last Active 3/11/10	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt		aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	•	
Yes	Other Specify Credit Card		

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Debic	Mary L Salazar	Case number (if know)	
4.1	IC Systems, Inc	Last 4 digits of account number 6001	\$330.00
	Nonpriority Creditor's Name 444 Highway 96 East Po Box 64378	When was the debt incurred? Opened 11/15	
	St Paul, MN 55164 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection Attorney Directv	
4.1 5	ICS Collection Services	Last 4 digits of account number	\$1,276.00
	Nonpriority Creditor's Name POB 1010 Tinley Park, IL 60477	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify collection	
4.1 6	IRS	Last 4 digits of account number	\$4,000.00
	Nonpriority Creditor's Name Special Procedures - Insolvency PO Box 7346	When was the debt incurred?	
	Philadelphia, PA 19101 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify taxes	

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Case number (if know)

DODIC	ivialy L Salazai									
4.1	JC Christensen and Associates	Last 4 digits of account number	\$609.20							
	Nonpriority Creditor's Name POBox 519									
	Sauk Rapids, MN 56379 Number Street City State Zlp Code Who incurred the debt? Check one.									
	■ Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:								
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts								
	☐ Yes	■ Other. Specify collection								
4.1	LVNV Funding	Last 4 digits of account number 7146	\$580.00							
8	Nonpriority Creditor's Name		Ψοσο.σο							
	Po Box 10497	When was the debt incurred? Opened 09/10								
	Greenville, SC 29603 Number Street City State Zlp Code	Code As of the date you file, the claim is: Check all that apply								
	Who incurred the debt? Check one.	no or and date year may and ordinarior or noon an anal appriy								
	Debtor 1 only									
	Debtor 2 only									
	☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:								
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts								
	☐ Yes	■ Other. Specify								
4.1	Main Street Acquisitions	Last 4 digits of account number	\$2,072.33							
	Nonpriority Creditor's Name	When was the debt incurred?								
	c/o Markoff Krasny 29 N Wacker, #550	when was the dept incurred?								
	Chicago, IL 60606	_								
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply								
	Who incurred the debt? Check one.									
	Debtor 1 only	Contingent								
	Debtor 2 only	☐ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:								
	At least one of the debtors and another	Student loans								
	☐ Check if this claim is for a community debt	Li Check if this claim is for a community								
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts								
	■ No									
	Yes									

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Case number (if know)

Debto	r 1 _Mary L Salazar		Case number (if know)	
4.2	Mercantile	Last 4 digits of account number		\$4,410.03
	Nonpriority Creditor's Name 35A Rust Lane Boerne, TX 78006	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify collection		
4.2	Midland Funding	Last 4 digits of account number	2752	\$856.00
	Nonpriority Creditor's Name 2365 Northside Dr Suite 300	When was the debt incurred?	Opened 12/12	
	San Diego, CA 92108 Number Street City State Zlp Code	As of the date you file, the claim	in Charle all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	s: Спеск ан тлат арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Factoring C Bank	ompany Account Target National	
4.2	Mount Sinai Hospital Nonpriority Creditor's Name	Last 4 digits of account number		\$1,441.00
	1905 Paysphere Circle Chicago, IL 60674	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	a Giann:	
	☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	nation agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify medical		

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Debtor 1 Mary L Salazar Case number (if know) 4.2 Northland Group Inc \$634.06 Last 4 digits of account number 3 Nonpriority Creditor's Name POB 390846 When was the debt incurred? Minneapolis, MN 55439 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify collection 4.2 Peoples Gas 3013 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 200 E Randolph St Opened 11/27/10 Last Active 20th Floor When was the debt incurred? 8/30/12 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Agriculture 4.2 Peoples Gas 3876 Unknown 5 Last 4 digits of account number Nonpriority Creditor's Name 200 E Randolph St Opened 5/31/12 Last Active 20th Floor When was the debt incurred? 8/29/13 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Agriculture ☐ Yes

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Debi	or i Mary L Salazar		Case number (if know)	
4.2 6	South Shore Hospital	Last 4 digits of account number		\$481.00
	Nonpriority Creditor's Name 8012 S. Crandon Ave	When was the debt incurred?		
	Chicago, IL 60617 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify medical		
4.2 7	Target	Last 4 digits of account number	2484	\$0.00
-	Nonpriority Creditor's Name	_		
	C/O Financial & Retail Services Mailstop BT PO Box 9475 Minagonalia MN 55440	When was the debt incurred?	Opened 7/02/01 Last Active 9/15/10	
	Minneapolis, MN 55440 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		
	Li Tes	Other. Specify Oredit Card		
4.2 8	Vital Recovery Services	Last 4 digits of account number		\$5,587.34
	Nonpriority Creditor's Name POB 923748	When was the debt incurred?		
	Norcross, GA 30010 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•	,	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	ng plans, and other similar debts		
		Other. Specify collection	ng piano, and other ominal debts	
	☐ Yes			

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Debto	or 1 Mary L Salazar		Case number (if kr	now)	
4.2	Vital Recovery Services	Last 4 digits of account number			\$5,629.74
Nonpriority Creditor's Name POB 923748		When was the debt incurred?			
	Norcross, GA 30010 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that app	ly	
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	<u> </u>			
	_	☐ Disputed Type of NONPRIORITY unsecure	d claim:		
	At least one of the debtors and another	☐ Student loans	a olulli.		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or o	divorce that you did not	
	<u> </u>	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing	ng pians, and other sii	milar debts	
	☐ Yes	Other. Specify collection			
4.3	Wells Fargo Dealer Services	Last 4 digits of account number	1064		\$0.00
	Nonpriority Creditor's Name	_	0 100/07		
	Po Box 3569 Rancho Cucamonga, CA 91729	When was the debt incurred?	Opened 02/07 11/21/09	Last Active	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that app	ly	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or o	divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other sir	milar debts	
	Yes	■ Other. Specify Automobile			
4.3	Weltman, Weinberg & Reis	Local Addition of a committee of a			\$628.01
1	Nonpriority Creditor's Name	Last 4 digits of account number			Ψ020.01
	323 Lakeside Ave Suite 200	When was the debt incurred?			
	Cleveland, OH 44113		: Ob l II 4b - 4	L.	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that app	ııy	
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or o	divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other sir	milar debts	
	☐ Yes	■ Other. Specify collection			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 Mary L Salazar

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	01	On the other con-	01	Total Claim
Total	6f.	Student loans	6f.	\$ 0.00
claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 32,948.78
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 32,948.78

		1700.000	II FAUE 37 ULUS	
Fill in this infor	mation to identify your	case:		
Debtor 1	Mary L Salazar			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>
	٠,		3. 3	0000	

		Docume	ent Page 33 d	าเคร	
Fill in this ir	nformation to identify your	case:			
Debtor 1	Mary L Salazar				
200101	First Name	Middle Name	Last Name		
Debtor 2	First Name	Middle None	Lost Nome		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case numbe	er				☐ Check if this is an amended filing
	Form 106H ule H: Your Cod	ebtors			12/15
people are fi ill it out, and our name a	ling together, both are equ	ally responsible for supp boxes on the left. Attach . Answer every question	olying correct informat n the Additional Page t	tion. If more space is r to this page. On the to	rate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
1. DO yo	ou have any codebiors: (iii)	you are ming a joint case, t	do not list either spouse	as a codebior.	
■ No □ Yes					
Arizona, No. G Yes. I 3. In Colur in line 2	California, Idaho, Louisiana, so to line 3. Did your spouse, former spousen 1, list all of your codebter again as a codebtor only i	Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	erto Rico, Texas, Wash with you at the time? spouse as a codebtor tor or cosigner. Make	ington, and Wisconsin.) r if your spouse is filin sure you have listed t	ty states and territories include g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
out Col		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	,
	olumn 1: Your codebtor me, Number, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	ame			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
Nu	umber Street				
Cit	ty	State	ZIP Code		
3.2				☐ Schedule D, lir	
	ame			Schedule E/F,	
				☐ Schedule G, lir	
Ni	umber Street			_	
Cit		State	ZIP Code		

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Cill	in this information to identify y	vour cac	0.				I				
	otor 1 Mary L										
	otor 2 use, if filing)					_					
Uni	ted States Bankruptcy Court f	for the:	NORTHERN DISTRIC	T OF ILLINOIS							
(If kn	se number						□ Ar		nt showin	g postpetition ollowing date:	chapter
	fficial Form 106l	_					M	M / DD/ Y	YYY		
	chedule I: Your										12/15
sup _i spo atta	as complete and accurate as plying correct information. I use. If you are separated anch a separate sheet to this formation. Describe Employers	If you ar nd your s form. Or	e married and not filin spouse is not filing wit	g jointly, and your h you, do not incl	spouse i ude inforr	s liv natio	ing with yon about	ou, incluyour spo	ide inforr use. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.			Debtor 1				Debtor 2	or non-fi	ling spouse	
	If you have more than one jo		Employment status	☐ Employed				☐ Employed			
	attach a separate page with information about additional	•	Employment status	■ Not employed				☐ Not employed			
	employers.		Occupation	Retired							
	Include part-time, seasonal, self-employed work.	, or	Employer's name								
	Occupation may include stu or homemaker, if it applies.	udent	Employer's address								
			How long employed th	ere?							
Par	t 2: Give Details Abou	ut Month	nly Income								
	mate monthly income as of use unless you are separated.		e you file this form. If y	ou have nothing to	report for	any	ine, write	\$0 in the	space. Ind	clude your no	n-filing
•	u or your non-filing spouse ha e space, attach a separate sh			mbine the information	on for all e	mplo	oyers for t	hat perso	n on the li	nes below. If	you need
							For Deb	tor 1		btor 2 or ng spouse	
2.	List monthly gross wages deductions). If not paid mor				2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly	overtim	e pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income.	Add line	2 + line 3.		4.	\$		0.00	\$	N/A	

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Debt	tor 1	Mary L Salazar	_	Case r	number (if known)		
				For	Debtor 1		Debtor 2 or filing spouse
	Cop	y line 4 here	4.	\$	0.00	\$	N/A
5.	List	all payroll deductions:					
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
	5e.	Insurance	5e.	\$	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
	5g.	Union dues	5g.	\$	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_			
	01	monthly net income.	8a.	\$	0.00	\$	N/A
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
	8e.	Social Security	8e.	\$	676.00	\$	N/A
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$	0.00	\$	N/A
	8g.	Pension or retirement income	8g.	\$	846.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,522.00	\$	N/A
10	Cald	culate monthly income. Add line 7 + line 9.	10. \$	1	,522.00 + \$		N/A = \$ 1,522.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	· · · · · ·	'			14/71
11.	Inclu othe	te all other regular contributions to the expenses that you list in <i>Schedule</i> ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depend		•		chedule J. 11. +\$ 0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12. \$ 1,522.00 Combined
10	D.	value avenue for increase and decrease within the correct force of the state of	2				monthly income
13.	□ ■	you expect an increase or decrease within the year after you file this form No. Yes. Explain:	(

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						•			
Fill	n this informa	tion to identify yo	our case:						
Debt	or 1	Mary L Salaz	ar				eck if this is: An amended filing		
Debt (Spo	or 2 use, if filing)						A supplement sho	wing postpetition chapter the following date:	
Unite	United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						MM / DD / YYYY		
Case number (If known)									
Of	ficial Fo	rm 106J							
Sc	hedule	J: Your	Exper	ises				12/1	
info	rmation. If m		eded, atta	. If two married people ar ich another sheet to this n.					
Part		ibe Your House	hold						
1.	Is this a joir								
	■ No. Go to		in a separ	ate household?					
	□N		•						
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Del	btor 2.		
2.	Do you have dependents? ■ No								
	Do not list Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?	
	Do not state							□ No	
	dependents	names.					_	□ Yes □ No	
								□ Yes	
					-			□ No	
							_	☐ Yes	
								□ No	
_	_							☐ Yes	
3.	expenses of	enses include f people other t d your depende	han $_{m \Box}$	No Yes					
		a your depende	iito i						
Esti exp	mate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp					
the		n assistance an		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses	
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4.	\$	850.00	
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$	0.00	
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.	·	0.00	
				upkeep expenses		4c.	·	0.00	
_		owner's associat			ma aquitu la area	4d.	·	0.00	
5.	Auditional f	nortyaye paym	ciilo (Of YC	our residence, such as ho	me equity loans	5.	D	0.00	

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Debtor 1	Mary L Salazar	Case num	ber (if known)	
2	tion:			
5. Utili 6a.	ties: Electricity, heat, natural gas	6a.	\$	250.00
6b.	Water, sewer, garbage collection	6b.		0.00
	Telephone, cell phone, Internet, satellite, and cable services		· · · · · · · · · · · · · · · · · · ·	
6c.		6c.	:	63.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	300.00
	dcare and children's education costs	8.	·	0.00
	hing, laundry, and dry cleaning	9.		75.00
	sonal care products and services	10.	*	25.00
	ical and dental expenses	11.	\$	25.00
	nsportation. Include gas, maintenance, bus or train fare.	12.	\$	0.00
3. Ent e	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
	ritable contributions and religious donations	14.	\$	0.00
. Insu	•			
	not include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	0.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	cify:	16.	\$	0.00
	allment or lease payments:		•	2.22
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I). er payments you make to support others who do not live with you.	10.	\$	0.00
Spe		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> e		our Income	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	
	Homeowner's association or condominium dues	20d. 20e.	·	0.00
			· -	0.00
i. Oth	er: Specify:		+\$	0.00
	culate your monthly expenses			
22a.	Add lines 4 through 21.		\$	1,588.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	1,588.00
				· .
	culate your monthly net income.	00-	¢	4 500 00
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	*	1,522.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,588.00
23c	Subtract your monthly expenses from your monthly income.			
200.	The result is your <i>monthly net income</i> .	23c.	\$	-66.00
	•			
	you expect an increase or decrease in your expenses within the year after yo			or doorooo because of -
	example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?	mortgage	payment to increase	or decrease decause of a
\square Y	'es. Explain here:			

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Fill in this infor					
Debtor 1		case.			
Debior 1	Mary L Salazar First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)				_	heck if this is an mended filing
Official For		n Individual	Debtor's Sch	nadulas	
Jeolai a	tion About b	III IIIaiviaaai	Deptol 3 dol	icaaics	12/15
· 	I8 U.S.C. §§ 152, 1341, 1	oro, and oor r.			
_	n Below				
		one who is NOT an attor	rney to help you fill out bar	nkruptcy forms?	
		one who is NOT an attor	rney to help you fill out bar	nkruptcy forms?	
Did you pa		one who is NOT an attor	rney to help you fill out bar	nkruptcy forms? Attach Bankruptcy Petitic Declaration, and Signatu	
Did you pa	ay or agree to pay some		rney to help you fill out bar	Attach Bankruptcy Petitic Declaration, and Signatu	
Did you pa	Name of person alty of perjury, I declare true and correct.		nmary and schedules filed	Attach Bankruptcy Petitic Declaration, and Signatu	
Did you part No No Yes. Under penathat they an X /s/ Ma Mary L	Name of person alty of perjury, I declare true and correct. Ty L Salazar Salazar			Attach Bankruptcy Petitic Declaration, and Signatu with this declaration and	
Did you part No No Yes. Under penathat they an X /s/ Ma Mary L	Name of person alty of perjury, I declare true and correct.		nmary and schedules filed	Attach Bankruptcy Petitic Declaration, and Signatu with this declaration and	

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Fill	in this infor	mation to identify you	r case:			
Deb	otor 1	Mary L Salazar				
		First Name	Middle Name	Last Name		
	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
(Spu	use II, IIIIIg)	riist name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Cas	se number					
	nown)					Check if this is an
						amended filing
∩f	ficial Fo	rm 107				
			Affaire for Indivi	duals Filing for B	ankruntov	A/4 (
						4/10
				are filing together, both are this form. On the top of an		
		n). Answer every que		tina form. On the top of an	y additional pages, write	your name and case
Par	t 1: Give	Dotaile About Vour Ma	arital Status and Where Yo	u Lived Refere		
Гаі	t i. Give	Details About Tour Wis	antai Status and Where TO	u Liveu Belole		
1.	What is you	ır current marital statı	ıs?			
	☐ Married	1				
	■ Not ma	-				
	_ Not ma	iiiicu				
2.	During the	last 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	_	st all of the places you l	ived in the last 3 years. Do r	not include where you live nov	ı	
		or all or the places you	ivod iii dio laot o yodio. Do i	iot morado umoro you iivo nov	•	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
			iived there			nved there
3.				gal equivalent in a commur		
State	es and ternior	nes include Anzona, Ca	illiomia, idano, Louisiana, Ne	evada, New Mexico, Puerto R	ico, rexas, washington and	a wisconsin.)
	■ No					
	☐ Yes. M	ake sure you fill out Sc	hedule H: Your Codebtors (C	Official Form 106H).		
Par	t 2 Expla	in the Sources of You	r Income			
4	Did you hay	ve any income from er	nnlovment or from operati	ng a business during this y	ear or the two previous ca	alandar vaars?
••	Fill in the tot	al amount of income yo	u received from all jobs and	all businesses, including part	-time activities.	nondar years.
	If you are fili	ng a joint case and you	have income that you receive	ve together, list it only once u	nder Debtor 1.	
	■ No					
	_	ll in the details.				
	100.11	aro dotallo.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
				,		,

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Debtor 1 Mary L Salazar Page 40 of 63
Case number (if known)

Did you receive any other income during this year or the two previous calendar y

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

Debtor 1		Debtor 2	
Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
SSI	\$4,732.00		
Pension	\$5,922.00		
SSI	\$8,112.00		
Pension	\$10,152.00		
SSI	\$8,112.00		
Pension	\$10,152.00		
	Sources of income Describe below. SSI Pension SSI Pension SSI	Sources of income Describe below. Gross income from each source (before deductions and exclusions) SSI \$4,732.00 Pension \$5,922.00 SSI \$8,112.00 Pension \$10,152.00 SSI \$8,112.00	Sources of income Describe below. Gross income from each source (before deductions and exclusions) SSI \$4,732.00 Pension \$5,922.00 SSI \$8,112.00 Pension \$10,152.00 SSI \$8,112.00

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either Debtor 1's	or Debtor 2's	debts primarily	consumer	debts?
----	-----------------------	---------------	-----------------	----------	--------

☐ No.	Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by ar
	individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

■ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount paid

Amount you still owe

Was this payment for ...

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Debtor 1 Mary L Salazar

Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% of	eral partners; partner or more of their voting	erships of which yo g securities; and ar	u are a genera ny managing a	al partner; corporations agent, including one for
_ 110					
. ,					
Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
insider?		ments or transfer a	any property on a	ccount of a d	ebt that benefited an
■ No Ves List all payments to an insider					
Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
		paiu	Still Owe	include cred	illoi s riame
t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				_
Case title	Nature of the case	Court or agency		Status of th	ne case
Case number					
		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?
Creditor Name and Address	Describe the Property		Date		Value of the
	Explain what happened	i			property
		luding a bank or fir	nancial institution	, set off any a	amounts from your
Creditor Name and Address	Describe the action the	creditor took			Amount
		erty in the possess			efit of creditors, a
t 5: List Certain Gifts and Contributions					
Within 2 years before you filed for bankrup	tcy, did you give any gift	s with a total value	of more than \$60	0 per person	?
_					
Gifts with a total value of more than \$600 per person	Describe the gifts				Value
Person to Whom You Gave the Gift and Address:					
	Insiders include your relatives; any general pade which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony. No	Insider's include your felatives; any general partners; relatives of any gen of which you are an officer, director, person in control, or owner of 20% of a business you operate as a sole proprietor. 11 U.S.C. § 101. Include paralimony. INO	Insider's Name and Address No	Insider's Name and Address Dates of payment Total amount paid Amount you still owe Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administr List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity and offications, and contract disputus. No Yes. Fill in the details. Creditor Name and Address Describe the Property Explain what happened Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnis Check all that apply and fill in the details below. No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took List applying the details. Creditor Name and Address Describe the action the creditor took List applying the details. Creditor Name and Address Describe the action the creditor took List all payments to an insider No Yes. Fill in the details. Creditor Name and Address Describe the Property List all payments Date Explain what happened Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnis Check all that apply and fill in the details below. Describe the Property List in the details. Creditor Name and Address Describe the Property List in the details. Creditor Name and Address Describe the action the creditor took List all payments to an insider Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assigned court-appointed receiver, a custodian, or another official? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date: taken Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and	No Yes. List all payments to an insider. Insider's Name and Address Dates of payment Total amount paid Amount you still lowe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a dinsider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider Insider's Name and Address Dates of payment Total amount paid Amount you reason for still owe include crec Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceet List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support modifications, and contract disputes. No Yes. Fill in the details. Case title Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address Describe the Property Explain what happened Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the bencount-appointed receiver, a custodian, or another official? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and

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Case number (if known) Document Debtor 1 Mary L Salazar

14.	Within 2 years before you filed for bankr			s with a tota	I value of more than	\$600 to any charity?
	☐ Yes. Fill in the details for each gift or co Gifts or contributions to charities that t more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code	otal	on. Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	ptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	the amount that insurance has paid. Loc claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers	i				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition process.	oreparin	g a bankruptcy petition?			rty to anyone you
	Yes. Fill in the details.				_	
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou ou	Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
	Law Office of Jason Blust 211 W Wacker Drive Ste. 300 Chicago, IL 60606		\$155 DDP \$29 Filing Fee \$250 Attorney Fees		2016	\$434.00
17.	Within 1 year before you filed for bankrupromised to help you deal with your creed Do not include any payment or transfer that No Yes. Fill in the details.	litors or	to make payments to your creditors		r transfer any prope	rty to anyone who
	Person Who Was Paid Address		Description and value of any propertransferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bankry transferred in the ordinary course of you include both outright transfers and transfers include gifts and transfers that you have already	r busine made a	ess or financial affairs? as security (such as the granting of a se		erty to anyone, othe	
	■ No □ Yes. Fill in the details.					
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you			, .		

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Debtor 1 Mary L Salazar

19.	Within 10 years before you filed for bankruptc beneficiary? (These are often called asset-prote		y property to a	self-settle	ed trust or similar device	of which you are	∌ a
	No						
	Yes. Fill in the details. Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer made	was
Pa	tt 8: List of Certain Financial Accounts, Instr	ruments. Safe Deposit	Boxes, and St	orage Uni	ts		
	Within 1 year before you filed for bankruptcy,	•	•	•		our benefit clos	-od
20.	sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associa	other financial accour	nts; certificates	of deposi		,	•
	■ No □ Yes. Fill in the details.						
		ast 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last bala before closin tran	
21.	Do you now have, or did you have within 1 yearsh, or other valuables?	ar before you filed for	bankruptcy, a	ny safe de	posit box or other depos	itory for securition	es,
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or No	place other than your	home within 1	year befo	re you filed for bankrupt	cy?	
	Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	rt 9: Identify Property You Hold or Control fo	•					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any proper	ty you bor	rowed from, are storing	for, or hold in tru	ıst
	■ No						
	☐ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	V	/alue
Pa	tt 10: Give Details About Environmental Inform	mation					
For	the purpose of Part 10, the following definition	ıs apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, ground				s or
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	s defined under any e		law, wheth	er you now own, operat	e, or utilize it or ι	used
	Hazardous material means anything an enviro		as a hazardous	waste, ha	zardous substance, tox	ic substance,	

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

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Debtor 1 Mary L Salazar

24.	Has	any governmental unit notified you that	you may be liable or potentially liable	e une	der or in violation of an environm	ental law?
		Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of	any release of hazardous material?			
		No Yes. Fill in the details.				
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	ıd	Environmental law, if you know it	Date of notice
26.	Hav	e you been a party in any judicial or adn	ninistrative proceeding under any env	iron	mental law? Include settlements	and orders.
		No Yes. Fill in the details.				
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case
Par	t 11:	Give Details About Your Business or	Connections to Any Business			
27.	Witl	nin 4 years before you filed for bankrupt	cy, did you own a business or have ar	ny of	f the following connections to any	/ business?
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity	, eith	ner full-time or part-time	
		☐ A member of a limited liability comp	any (LLC) or limited liability partnersh	nip (l	LLP)	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation			
		No. None of the above applies. Go to F	art 12.			
		Yes. Check all that apply above and fill	in the details below for each business	s.		
		siness Name dress	Describe the nature of the business		Employer Identification numbe Do not include Social Security	
		mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	number of fritt.
28.		nin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Incl	ude all financial
		No Yes. Fill in the details below.				
		me dress mber, Street, City, State and ZIP Code)	Date Issued			

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Debtor 1 Mary L Salazar

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I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptoy case can result in fines up to \$250,000 or imprisonment for up to 20 years, or both

18 U.S.C. §§ 152, 1341, 1519, and 3571.	
/s/ Mary L Salazar Mary L Salazar	Signature of Debtor 2
Signature of Debtor 1	
Date August 12, 2016	Date
Did you attach additional pages to Your	Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the	e Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:		
Debtor 1	Mary L Salazar			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 108			
Stateme	nt of Intentio	n for Indiv	iduals Filing Under Chapt	er 7 12/15
	lividual filing under cha	-	out this form if:	
	e claims secured by yo			
You must file th	ever is earlier, unless th	ithin 30 days after y	ot expired. you file your bankruptcy petition or by the date s time for cause. You must also send copies to the	
	eople are filing together nd date the form.	r in a joint case, bot	h are equally responsible for supplying correct i	nformation. Both debtors must
	and accurate as possib our name and case nur		needed, attach a separate sheet to this form. Or	the top of any additional pages,
Part 1: List Y	our Creditors Who Have	e Secured Claims		
1. For any credit	tors that you listed in Pa		Creditors Who Have Claims Secured by Proper	y (Official Form 106D), fill in the
information b	elow. reditor and the property the	hat is collateral	What do you intend to do with the property that	t Did you claim the property
,			secures a debt?	as exempt on Schedule C?
Creditor's (City of Chicago		Surrender the property.	□ No
name:			Retain the property and redeem it.	■ Yes
Description of	f 8523 S. Exchange A	Ave Chicago,	Retain the property and enter into a Reaffirmation Agreement.	– 163
property	IL 60617 Cook Cou	inty	☐ Retain the property and [explain]:	
securing debt	: Debtor intends to su	ırrender		
	Value according to			
	www.zillow.com			_
0 111 1				_
Creditor's (Cook County Treasure	r	Surrender the property.	□ No
name.	of 8523 S. Exchange Ave Chicago, IL 60617 Cook County		☐ Retain the property and redeem it.☐ Retain the property and enter into a	■ Yes
Description of property			Reaffirmation Agreement. Retain the property and [explain]:	
securing debt	: Debtor intends to su	ırrender		
	Value according to www.zillow.com			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Mary L Salazar			Case number (if known)		
	Creditor's name:	Ditech Financial Llc	Surrender the property.Retain the property and redeem it.	□ No ■ Yes	
	Description property securing de	IL 60617 Cook County	☐ Retain the property and enter into a go, Reaffirmation Agreement. ☐ Retain the property and [explain]:	- res	
		Value according to www.zillow.com			
For in t	any unexp	ition below. Do not list real estate lea	Leases u listed in Schedule G: Executory Contracts and Unexpises. Unexpired leases are leases that are still in effect; lease if the trustee does not assume it. 11 U.S.C. § 365(p	the lease period has not yet ended.	
De	escribe you	ır unexpired personal property lease	S	Will the lease be assumed?	
De	ssor's name			□ No	
Pr	operty:			☐ Yes	
De	ssor's name escription of operty:			□ No	
	орену.			☐ Yes	
De	ssor's name escription of			□ No	
Pr	operty:			☐ Yes	
	ssor's name			□ No	
	escription of operty:	leased		☐ Yes	
	ssor's name			□ No	
	escription of operty:	leased		☐ Yes	
	ssor's name			□ No	
	escription of operty:	leased		☐ Yes	
	ssor's name			□ No	
	operty:	loadou		☐ Yes	
Pa	art 3: Sig	n Below			
		of perjury, I declare that I have indic is subject to an unexpired lease.	cated my intention about any property of my estate that	secures a debt and any personal	
Х	/s/ Marv	[,] L Salazar	x		
•	Mary L		Signature of Debtor 2		
	Date	August 12, 2016	Date		

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Mary L Salazar Case number (if known)

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-25933 Doc 1 Filed 08/12/16 Entered 08/12/16 12:21:37 Desc Main Document Page 53 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Mary L Salazaı	ſ				C	Case No.		
					Debtor(s)		Chapter	7	
					NSATION OF AT				
	compensation paid to	me v	within one year be	efore the filin	5(b), I certify that I am the ng of the petition in bankr of or in connection with the	ruptcy, or agreed to	o be paid t	to me, for servic	
	For legal service	es, I h	ave agreed to acc	ept		\$		250.00	
	Prior to the filin	g of t	his statement I ha	ve received		\$		250.00	
	Balance Due					\$		0.00	
2.	The source of the cor	mpens	sation paid to me	was:					
	Debtor		Other (specify):						
3.	The source of compe	nsatio	on to be paid to m	e is:					
	Debtor		Other (specify):						
4.	■ I have not agreed	l to sh	nare the above-dis	sclosed comp	pensation with any other p	person unless they	are memb	ers and associat	es of my law firm.
					ation with a person or per mes of the people sharing				my law firm. A
5.	In return for the abo	ve-dis	sclosed fee, I have	e agreed to re	ender legal service for all	aspects of the ban	kruptcy ca	ase, including:	
	b. Preparation and fc. Representation ofd. [Other provisions	iling of the d s as ne	of any petition, sollebtor at the meeting edd]	thedules, stati ing of credite	ering advice to the debtor tement of affairs and plan ors and confirmation hear uce to market value; exe	which may be req ing, and any adjou	uired; irned hear	ings thereof;	oankruptcy;
6.					e does not include the foll ersary proceedings.	lowing service:			
					CERTIFICATION				
	I certify that the fore bankruptcy proceeding		is a complete stat	tement of an	y agreement or arrangeme	ent for payment to	me for re	presentation of	the debtor(s) in
_/	August 12, 2016					ıst, Law Office of			
1	Date				Jason Blust, Signature of A	Law Office of Ja	son Blus	t #6276382	
						f Jason Blust			
					211 W Wack				
					Ste. 300	20000			
					Chicago II 6	วเมาเท			

(312) 273-5001 Fax: (312) 273-5022

Name of law firm

LAW OFFICE OF JASON BLUST, LLC

CONTRACT FOR BANKRUPTCY SERVICES

UNSECURED & SECURED DEBTS	NON-DISCHARGEABLE DEBTS
ESTIMATED UNSECURED DEBT	
ESTIMATED FAIR MARKET VALUE OF HOME	TICKETS
ESTIMATED MORTGAGES ON HOME	CHILD SUPPORT
ESTIMATED CAR LIEN #1	TAX DERT
ESTIMATED CAR LIEN #2	GOV'T FINES
ESTIMATED OTHER SECURED DEBT	OTHER
NOTICE: This Agreement contains provisions requiring arbitration of fee disposaler consulting with another leaves	utes. Before you sign the agreement you should

NOTICE: This Agreement contains provisions requiring arbitration of fee disputes. Before you sign the agreement you should consider consulting with another lawyer about the advisability of making an agreement with mandatory arbitration requirements. Arbitration proceedings are ways to resolve disputes without the use of the court system. By entering into agreements that require arbitration as the way to resolve fee disputes, you give up your right to go to court to resolve these disputes by a judge or jury. These are important rights that should not be given up without careful consideration.

I. PARTIES & PURPOSE: This is an agreement for legal services entered into on the date shown below between Law Office of Jason Blust, LLC, or one of its wholly owned subsidiaries (hereinafter "JB") and the individual (or married couple) assigned to the record number indicated below (hereinafter "Client") relating to legal services in relation to bankruptcy and debt relief. The contract is solely between JB, any assigns, heirs, or related entities that may be formed in the future and not any individual, partner, member or employee of JB. JB is a debt relief agency and law firm that files bankruptcy cases on behalf of its clients. JB DOES NOT REPRESENT CLIENTS IN DEFENSE OF COLLECTION SUITS.

II. CLIENT OBLIGATIONS: JB reserves the right to withdraw or terminate the representation in the event Client does not meet his/her obligations.

Active Participation and Communication: Client agrees to actively participate and communicate with any and all JB staff during the duration of the bankruptcy case. This includes immediately providing updated contact information and any changes to Client's financial situation including, but not limited to, any state court hearing dates or foreclosure sale notices. Client's signature on this Contract shall be authorization for JB to file a bankruptcy petition for Client via the Bankruptcy Court's electronic filing system and all other subsequent filings through the Bankruptcy Court's electronic filing system. Client agrees to receive documents and/or correspondence from JB via either email or first class mail. Client agrees that JB can contact Client at any reasonable time in JB's sole discretion via email, text message, telephone, or postal mail.

Payment of Attorney Fees and Costs/Arbitration: Client agrees to pay all attorney fees and costs as disclosed herein in a timely manner and that fees and costs, as disclosed must be paid before the case is filed with the bankruptcy court. JB only represents Client and Client controls the representation even if the fee is paid by a third-party. JB and Client expressly agree to resolve fee disputes via Arbitration (see Section IX).

The "flat fee" for representation in a Chapter 7 case is \$________. This fee is a nonrefundable* "advance payment retainer". In a Chapter 7 case, Client agrees to pay all fees and costs prior to the filings of the bankruptcy case with the bankruptcy clerk's office. Client acknowledges that Client will not have the protection of the Automatic Stay in Bankruptcy pursuant to 11 U.S.C. §362 until the bankruptcy case is filed. There may be additional fees charged by JB for delays caused by

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the Client, including Client's failure to pay fees in a timely manner, and failure to timely provide information and/or paperwork. Client expressly agrees that funds paid will be deposited in JB's operating account and are the property of JB. The "flat fee" for representation in the Chapter 13 case is \$______ plus costs. JB agrees to file the client's Chapter 13 case with the court for the payment of \$____ and will accept the balance from Client's Chapter 13 payments. Any estimated chapter 13 monthly payment is subject to change and JB does not guarantee a particular chapter 13 payment. Costs include not only filing fee and other third party services, but also copying charges, bank transaction fee, credit card interchange fees, express mail, postage, etc. In addition, there is a court filing fee totaling \$ 336 (subject to change without notice) and optional document retrieval and financial counseling facilitation totaling \$___155__ (subject to change without notice). Client expressly agrees that chapter 7 and chapter 13 fees paid are an advance payment retainer and not a security retainer and such arrangement is an express condition of JB's willingness to handle the case. An advance payment retainer is appropriate because work is being performed from the moment the firm is hired and continues through the relationship, even if a case is never filed with the court. In Chapter 13, the fixed flat fees and advance payment retainer are for pre-filing and preconfirmation work. All fees paid are the property of the attorney and will be deposited into JB's operating account and are earned upon receipt, subject to refund only as provided in Section IV, Though the fee is fixed, in chapter 13's JB may apply to the court for additional fees, paid through the chapter 13 plan if there are extraordinary circumstances, such as extensive evidentiary hears, contested adversary proceedings, or appeals. See Section III for further details. Advance payment of costs may be held in a safe deposit box, a locked safe, a trust account, or any other secure place in JB's sole discretion until incurred and used to reimburse JB for payment \(\textit{728} \) Client's Initials.

Dishonored Payments incur a fee of \$35 + any additional fees and costs incurred by JB as a result of dishonored or stopped payments. Failure to pay can result in JB closing the file and terminating the attorney-client relationship (see Section IV). In the event Client's chapter 13 is dismissed prior to full payment of attorney fees. Client agrees and expressly authorizes the chapter 13 trustee to pay any money held to JB for payment of the balance owed. Client agrees that JB may retain counsel to collect any balances due and will be responsible for payment of any reasonable collection costs and fees, not less than \$400. Client authorizes the collection of any additional fees from the chapter 13 trustee (if applicable). Client expressly agrees that fees tendered to JB by personal check may be converted and processed as ACH transaction. JB agrees to pursue third parties who may be liable for payment of fees, but failure of JB to collect from third parties does not relieve client of responsibility for payment. Client agrees that non-basis services are billed at the firms' customary hourly rate as described in Section IV. Billable (see Section III).

Full Disclosure: Client agrees to truthfully, completely and accurately disclose all assets and their value, liability and their balances, income and expenses to JB any on any and all bankruptcy paperwork. In addition, Client agrees to accurately answer any and all questions posed by JB and/or a representative or agent of the United States Trustee or as otherwise provided by law.

Provide Documentation and Follow Instructions: Client agrees to provide copies of any and all documentation requested by JB in a timely and organized manner. Client expressly acknowledges and agrees that JB has duties to the Court that require JB to reasonably seek documentary evidence that supports Clients' factual contentions before JB can sign off and file bankruptcy paperwork with the court. Such documentation includes, but is not limited to: pay advices for the six month time period this contract that the six month time period changes that since the case is not filed immediately upon and signing of applicable), recorded mortgages (if applicable), non-filing spouse's (or household member's) pay advices, and any other relevant information directly or indirectly related to the Client's financial condition. Client further agrees that he/she will read and follow all instructions provided to Client and incorporated by reference and made a part of this Contract for services.

III. LAW FIRM OBLIGATIONS:

Use Best Efforts: In consideration of Client's obligations as stated in Section III, JB agrees to use its best efforts to obtain a satisfactory result for Client by providing basic legal services in connection with a bankruptcy case on an efficient and cost-effective basis. Client expressly agrees that JB makes no guarantee regarding the outcome of the bankruptcy case, including but not limited to: ability and qualification for filing chapter 7 or chapter 13 bankruptcies, successful discharge of any particular debt, the amount of a chapter 13 plan payment, and/or whether or not JB can successfully reduce the balance of secured liens. JB offers its financial situation, and/or facts as revealed after review of documentation that could affect in any way any advice JB gives Client.

Staffing: JB structures its practice as a group practice. JB does not guarantee any minimum level of participation in a case by any individual employee, member, attorney, paralegal, or partner of the firm. Multiple attorneys and staff may work on various aspects of the case as assigned by JB in its sole discretion in compliance with all applicable rules of professional conduct. JB expects to perform the bulk of the work, but reserves the right to utilize other attorneys, paralegals, and litigation/clerical assistants where appropriate. In addition, Client authorizes JB, at its discretion, to have attorneys within the firm, or outside counsel, review Client's file to explore other potential causes of action client may have.

Provide Basic Bankruptcy Services: JB, in consideration for Client's obligations as stated in Section III, agrees to provide basis legal services as required to file either a Chapter 7 or Chapter 13 Bankruptcy case, the Chapter determined as mutually agreed and indicated below. Basic legal services include, but are not limited to: pre-filing verification of bankruptcy representation, post-filing and pre-discharge contract with creditors, pre-filing advice and counsel to Client, advice during the case concerning the nature and effect of the applicable bankruptcy rules, including a reasonable amount of telephone calls and/or in-person meetings, exemption advice and planning; preparation and filing of a bankruptcy petition, preparation and filing of schedules and statements as required by bankruptcy statutes, rules, local rules, and any applicable standing orders of courts of competent jurisdiction, representation at the meeting of creditors pursuant to §341 of the Bankruptcy Code, representation at any confirmation hearings pursuant to §1324 (if applicable), setting valuation disputes prior to confirmation in Chapter 13, submitting information pursuant to requests from the trustee, including submitting information in response to case audits requested by the United States Trustee, negotiation and counsel in relation to reaffirmation agreements pursuant to 11 U.S.C. §524; and other regular and routine services not specifically stated, including additional terms as may be described in Section UII, if applicable. Client expressly agrees that in Chapter 7, JB will not file the bankruptcy petition and schedules with the court until all required documentation has been provided; all required documents are timely signed, reviewed, and verified, unless alternative

Client further agrees that the above-described fees cover basic services only. There may be additional fees for non-basic services in addition to those disclosed above. Subject to the applicability of any local rules, standing orders, or additional contracts, non-basic services for which additional fees may apply include, but are not limited to: Adversary proceedings pursuant to 11 U.S.C. §523 or §727; excessive phone calls or in-person consultations; motions to dismiss for client's failure to attend court hearings or failure to provide requested documentation; action to enforce the automatic stay pursuant to 11 U.S.C. §362; actions to enforce the discharge injunction; Rule 2004 Examinations; depositions; interrogatories or other discovery proceedings; contested objections to confirmation of a Chapter 13 plan; amended creditor schedules (typically \$150 in chapter 7 + \$30 filling fee in all chapters, subject to change); amended asset and/or income/expense schedules due to Client's failure to provide full disclosure; document retrieval services; facilitation of credit counseling and/or financial Client's failure to appear at a scheduled meeting (typically \$150 in chapter 7); motions to avoid liens (typically \$260 per motion); proceedings to strip mortgages when applicable; and motions for redemption pursuant to 11 U.S.C. §722 (typically \$600); conversion of a case from one chapter to another (requires an additional in-person meeting and results in additional reasonable fees and costs as mutually agreed); and/or proceedings to reopen a closed case for any reason.

IV. TERMINATION OF SERVICES (Refund Policy): The parties may terminate services at any time. Termination of services by Client must be in writing. JB may terminate services for failure of Client to fulfill any of Client's contractual obligations as identified in Section II of this agreement. In either event, Client may be entitled to a refund of part of the nonrefundable fee

based upon quantum meruit. The factors considered include: time spent, including time spent answering telephone calls, processing, organizing and responding to any correspondence; case status; case progress; and the amount of work remaining to complete the case. Analysis of time is calculated in tenths of an hour increments, rounded up to the next tenth of an hour. Attorney time is worth \$250-\$450 per hour depending on the experience of the attorney performing the service. Non-attorney professional time is worth \$75 per hour. Hourly rates are subject to periodic review and revision at JB's sole discretion. JB will also consider the progress of the case when determining a reasonable refund. It is impossible to determine a fair refund until a detailed analysis is performed on a case-by-case basis. Refunds, if any, will be sent to Client at Client's last known address within a reasonable amount of time. In the event Client is deceased or incapacitated, or if the fee was paid by a third party, refunds, if any, are the property of the Client and will only be released to the Client or an authorized representative of the Client's estate. In the event Client terminates services after a bankruptcy case has been filed, JB is given a reasonable time to file withdrawal and/or substitution of counsel documents with the clerk of court. JB expressly reserves the right to enforce a previous award of fees and to seek payment of any outstanding balance of legal fees. The parties expressly agree that JB's representation automatically terminates upon the closing of the case by the Clerk of Court. Client expressly agrees that JB is authorized to contact Client in the future, even after the conclusion of the case via mail, telephone, electronic mail or text

V. LIMITED POWER OF ATTORNEY: Client expressly agrees that signature on this contract grants JB a Limited Power of Attorney for the purposes of carrying out the bankruptcy representation. Such power includes, but is not limited to, the power to obtain Client's tax returns or transcripts from either the IRS or any person or entity consulted in regards to tax preparation; the ability to obtain information and discuss Client's situation with any of Client's secured creditors; and in the event the bankruptcy is dismissed or converted prior to completion, JB may apply funds on hand with the Chapter 13 trustee that would otherwise be forwarded to Client towards the balance owed to JB, if any, and/or the Chapter 7 fee, if applicable, by granting JB trustee and applied.

VI. RETENTION AND DISPOSITION OF RECORDS: JB will retain records as required by applicable law in your state, generally at least (5) years. JB, reserves the right to store records electronically. JB encourages Client to keep and maintain copies of all bankruptcy related matters. Client may request a copy of the file by sending a written request. JB reserves the right to charge a reasonable retrieval and duplication fee of at least \$35.

VII. RECEIPT OF MANDATORY NOTICE AND DISCLOSURE: The Bankruptcy Abuse and Prevention and Consumer Protection Act of 2005 require JB to provide mandatory notices/disclosures to Client. Your signature on this contract is an acknowledgment that Client has received, read and understood the two(2) separate documents entitled "§525(a) Notice", and "Important Information About Bankruptcy Assistance Services From an Attorney or bankruptcy Petition Preparer."

VII. ENTIRE AGREEMENT: The entire contract between the Parties is contained in this instrument. Parties agree to all of the terms and conditions set forth herein and acknowledge that they have read and understand this Agreement. In the event Client is filing a case in a jurisdiction where the local bankruptcy court has adopted any rule procedure or general order regarding the relationship between the Attorney and the Client, then such rule, procedure, Court Order, "Rights & Responsibilities Agreement," or "Model Retention Agreement" and its corresponding rights and obligations is specifically incorporated by its terms which supersede and control all provisions of this contract. Client signature on this document serves as an Responsibilities Agreement by Client that client has been informed of such a rule, procedure, Order "Rights and conditions. In the event provisions of this Agreement' and has agreed to be bound by its additional terms and "Rights & Responsibilities Agreement," and/or "Model Retention Agreement" the provisions of the Rules, Procedure, Court Order, Order, "Rights & Responsibilities Agreement," and/or "Model Retention Agreement" the provisions of the Rules, Procedure, Court Order, "Rights & Responsibilities Agreement," or "Model Retention Agreement" would control.

IX. BINDING ARBITRATION: In the event of any controversy, claim or dispute between the parties arising out of or relating to this agreement or the breach, termination, enforcement, interpretation, unconscionability or validity thereof, including the termination of the scope or applicability of this agreement to arbitrate, shall be determined by arbitration in the county and state in which the consumer resides at the time of the agreement in accordance with the laws of the state of consumer's

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residence at the time of the agreement or agreements to be made in and to be performed in the state of the consumer's residence. The parties agree, the arbitration shall be administered by the American Arbitration Association ("AAA") pursuant to its rules and procedures and an arbitrator shall be selected by the AAA. The arbitrator shall be neutral and independent and shall comply with the AAA code of ethics. The award rendered by the arbitrator shall be final and shall not be subject to vacation or modification. Judgment on the award made by the arbitrator may be entered in any court having jurisdiction over the parties. If either party fails to comply with the arbitrator's award, the injured party may petition the circuit court for enforcement. The parties agree that either party may bring claims against the other only in his/her or its individual capacity and not as a plaintiff or class member in any purported class or representative proceeding. Further, the parties agree that the arbitrator may not consolidate proceedings of more than one person's claims, and may not otherwise preside over any form of representative or class proceeding. The parties shall share the cost of arbitration, including attorney's fees, equally. If the consumer's share of the cost is greater that \$1,000.00 (One-thousand dollars), JB will pay the consumer's share of costs in excess of that amount. In the event a party fails to proceed with arbitration, unsuccessfully challenges the arbitrator's award, or fails to comply with the arbitrator's award, the other party is entitled to costs of suit, including a reasonable attorney's fee for having to compel arbitration or defend or enforce the award. Binding Arbitration means that both parties give up the right to a trial by jury. It also means that both parties give up the right to appeal from the arbitrator's ruling except for a narrow range of issues that can or may be appealed. It also means that discovery may be severely limited by the arbitrator. This section and arbitration requirement shall survive any termination.

X. SEVERABILITY: In the event any provision of this agreement is found to be unenforceable for any reason by a court of competent jurisdiction, only the offending clause shall be stricken from the agreement and the remainder of the agreement shall remain in full force and effect.

I/We hereby agree to and acknowledge all of the terms above and I/we retain and authorize JB to file a bankruptcy on my/our behalf:

CHAPTER 7 / CHAPTER 13 (circle one	e)	RECORD # 5088749
*Mary L. Salagae	DATE <u>07-8-16</u>	BY: 4 Z
Debtor		Attorney of behalf of JB
X	DATE	
Joint Debtor		•

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United States Bankruptcy Court Northern District of Illinois

In re	Mary L Salazar	Debtor(s)	Case No. Chapter 7	
	VEI	RIFICATION OF CREDITOR M		
		Number of	Creditors:	31
	The above-named Debtor(s) l (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to t	he best of my
Date:	August 12, 2016	/s/ Mary L Salazar Mary L Salazar Signature of Debtor		

Access Community Health Network Dept 9090 PO Box 87618 Chicago, IL 60680

ARM POB 129 Thorofare, NJ 08086

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

CBCS POB 163250 Columbus, OH 43216

CCI/Contract Callers Inc Po Box 3000 Augusta, GA 30903

Chicago Imaging, LTD POB 3183 Carol Stream, IL 60132

City of Chicago Department of Finance POB 6330 Chicago, IL 60680

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Convergent POB 1022 Wixom, MI 48393

Cook County Health & Hospital 25706 Network Place Chicago, IL 60673

Cook County Treasurer POB 805436 Chicago, IL 60680

Ditech Financial Llc 345 St Peter St Saint Paul, MN 55102

Enhanced Recovery Company 8014 Bayberry Rd Jacksonville, FL 32256

Financial Recovery Services, Inc POB 385908 Minneapolis, MN 55438

Hsbc Bank Usa, Na Po Box 2013 Buffalo, NY 14240

IC Systems, Inc 444 Highway 96 East Po Box 64378 St Paul, MN 55164

ICS Collection Services POB 1010
Tinley Park, IL 60477

IRS Special Procedures - Insolvency PO Box 7346 Philadelphia, PA 19101

JC Christensen and Associates POBox 519 Sauk Rapids, MN 56379

LVNV Funding Po Box 10497 Greenville, SC 29603 Main Street Acquisitions c/o Markoff Krasny 29 N Wacker, #550 Chicago, IL 60606

Mercantile 35A Rust Lane Boerne, TX 78006

Midland Funding 2365 Northside Dr Suite 300 San Diego, CA 92108

Mount Sinai Hospital 1905 Paysphere Circle Chicago, IL 60674

Northland Group Inc POB 390846 Minneapolis, MN 55439

Peoples Gas 200 E Randolph St 20th Floor Chicago, IL 60601

South Shore Hospital 8012 S. Crandon Ave Chicago, IL 60617

Target C/O Financial & Retail Services Mailstop BT PO Box 9475 Minneapolis, MN 55440

Vital Recovery Services POB 923748 Norcross, GA 30010

Wells Fargo Dealer Services Po Box 3569 Rancho Cucamonga, CA 91729 Weltman, Weinberg & Reis 323 Lakeside Ave Suite 200 Cleveland, OH 44113